ALTERNATIVES:

A Strategy for Prevention Practitioners

Developed by
CSAP's Northeast Center for the Application of Prevention Technologies

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
Substance Abuse and Mental Health Services Administration
Center for Substance Abuse Prevention
www.samhsa.gov

We are pleased to welcome you to CSAP's Northeast Center for the Application of Prevention Technologies (CAPT). Since 1997, we have been working with six New England and five mid-Atlantic states to effectively transfer knowledge to the local level and strengthen states' capacity to prevent and reduce alcohol and other drug use in youth ages 12–17.

The Center for Substance Abuse Prevention (CSAP) in the Substance Abuse and Mental Health Services Administration is the nation's lead agency for substance abuse prevention. In addition to funding studies to test programs, CSAP spreads the word about scientifically defensible, effective programs that will enhance the efforts of prevention practitioners, policymakers, and evaluators. We hope you will visit the CSAP Web site at www.samhsa.gov/csap/. CSAP's Decision Support System (DSS) promotes scientific processes for substance abuse prevention for use within communities and state prevention systems. To learn more about CSAP's DSS, visit their Web site at www.preventiondss.org.

This series on effective strategies includes documents on Policy, Enforcement, Collaboration, Communications, Education, Early Intervention, and Alternatives. Special thanks to Stephanie Malloy at CSAP's Northeast CAPT for her assistance in creating this document.

Funded by the Center for Substance Abuse Prevention (CSAP), Substance Abuse and Mental Health Services Administration Department of Health and Human Services Grant #UD1-SPO8999-03.

ALTERNATIVES:
One of Seven Science-Based Prevention Strategies

WHAT WORKS IN PREVENTION?
Researchers at the national level are making great strides toward answering this important question. In recent years, they have distilled effective strategies and principles from the many programs that seek to prevent and reduce substance abuse. Now, across the country, more and more practitioners are coming to understand how critical it is to identify and use science-based strategies that are likely to be effective in meeting the needs of the people they serve.

For the Center for Substance Abuse Prevention (CSAP), Gardner and Brounstein have identified principles of effective substance abuse prevention.[1] From these, CSAP's Northeast CAPT has specified seven effective prevention strategies. (see chart before endnotes) They are:

- Policy
- Enforcement
- Collaboration
- Communications
- Education
- Early Intervention
- Alternatives

Alternatives—activities designed to provide young people with healthy, positive, constructive ways to structure their time—can complement the other strategies by occupying young people's time during the non-school hours. Mentoring, community service, recreational programs, and youth drop-in centers are just a few examples of alternative strategies being used to promote substance-free lifestyles. Alternatives function as a valuable adjunct to primary prevention efforts and can make prevention fun. Most importantly, they offer healthy options to meet youths' natural needs for stimulation, relaxation, and social interaction.

As communities around the country are learning, the key to effective prevention is to use multiple strategies, in multiple settings, toward one common goal. Communities should examine their local situations, identify their specific needs, and look for ways to combine the seven effective prevention strategies.

Multiple strategies, in multiple settings, toward one common goal.

WHAT ARE "ALTERNATIVES"?

Today's young people have a lot of free time on their hands. When school lets out at 2:00 and parents aren't home until 6:00 or later, the latchkey child often faces an afternoon devoid of structure or companionship. While some youth immerse themselves in basketball, art classes, the debate team, or the drama club, others find that their leisure time lacks supervision, stimulation, or positive outlets for self-discovery.

Experience shows, and research confirms, that the after-school hours are the most common time for youth to get involved in alcohol, drugs, sex, and crime. Youth in poorer communities are particularly vulnerable, as cutbacks in after-school programs and limited resources leave young people with few options and many temptations.[2]

- A U.S. Department of Health and Human Services study found that students who spent no time in after-school programs were 49 percent more likely to have used drugs, compared to those who spent one to four hours a week in such programs.[3]
- One study of nearly 5,000 eighth graders found that children who took care of themselves for 11 or more hours a week were twice as likely to use alcohol, tobacco, or other drugs.[4]
- Children who were home alone two or more days per week were four times more likely to have abused alcohol in the previous month than children who had adult supervision.[5]
- A national study of adolescent time found that when compared to adolescents who spend up to 20 hours per week in extracurricular activities, students who spend no time doing so were 57 percent more likely to drop out of school, 49 percent more likely to use drugs, 37 percent more likely to be teen parents, 35 percent more likely to smoke, and 27 percent more likely to be arrested.[6]

In the field of substance abuse prevention, the term *alternatives* generally refers to programs specifically designed to stimulate and engage young people during non-school hours through positive, healthy activities—alcohol-, drug-, and violence-free. Alternative programs seek to prevent young people from turning to alcohol or other drugs by offering opportunities for peer bonding, learning, play, and sensation-seeking in a safe, supervised, and supportive environment. Drop-in recreation centers, after-school and weekend programs, dances, adventure programs, community service activities, tutoring, and mentoring are all examples of alternatives designed to deter young people from dangerous behaviors and help them develop into socially mature, self-disciplined, and independent individuals.

However, while some alternatives programs have proven quite valuable and viable, research on alternatives is still fairly new. Most of these programs have not been evaluated with rigor, and some programs, while seemingly sensible and well-intentioned, may make only a minimal difference in the outcomes for youth. Programs that do not incorporate effective science-based strategies may provide enjoyable experiences for youth but will ultimately have little to no effect on alcohol and other drug use.

Still, initial studies have shown that alternatives can be effective when key elements are present—such as a focus on building skills, targeting youth most at risk, pairing young people with caring adults, and providing consistent, intensive services over time.

Alternatives programs are complemented by educational and environmental strategies; unfortunately too many current programs are one-shot efforts without the power to have a lasting impact. Some communities have tended to turn to alternatives first, even though, to be truly effective, these programs must

target the highest-risk youth and are among the most time- and resource-intensive strategies. Alternative strategies alone are not enough to prevent substance abuse among youth. Enrichment and recreational activities *must* be paired with other strategies that have been proven effective, such as policies to reduce the availability of alcohol, tobacco, and other drugs, or social and personal skill-building.

Alternatives fall into four main categories:

- **Mentoring programs,** which seek to increase kids' positive attitudes toward others, the future, and school by pairing high-risk youth with caring adults
- **Community service and service learning,** which promotes an increased sense of well-being and better attitudes toward people, the future, and the community
- **Skill-building programs** that provide informal education and enrichment activities to build life skills
- **Recreational activities** associated with decreasing substance abuse and delinquency by providing alternatives to destructive behaviors while also providing social and emotional rewards

This paper explores the four types of alternatives programs; presents the research evidence, or lack thereof, on the effectiveness of each.

BENEFITS OF ALTERNATIVES

Alternatives can enrich young people's lives and complement the learning and growth that goes on in school and at home:

- Although the science of prevention programming is relatively new and few alternative programs have yet been rigorously evaluated, there is some evidence that alternatives can be an important part of substance abuse prevention and may, in some instances, reduce the risk of juvenile substance use and abuse.[7]

- Alternatives may provide an effective means of reaching high-risk youth, particularly youth who are disconnected from the school environment and thus unlikely to benefit from school-based prevention programs.[8]

- Involving young people in planning their own events, programs, parties, and recreation can teach them the leadership and social skills they will need to build rewarding, successful lives.

- Alternative events and programs help communities take a visible stance against youth substance use and can effect changes in social norms regarding alcohol and other drug use.[9]

- Enriching community programs for youth can relieve some of the burden on busy parents, guardians, and teachers, thereby involving the larger community in raising happy youngsters and shaping their futures.

Features of Effective Alternative Programs

When developing alternative programs or activities for youth, program planners are encouraged to think scientifically and select practices that are most likely to have a viable impact on youth. While some after-school or evening activities may be fun for young people and provide stimulation and distraction, prevention dollars may best be spent on programs known to be effective in reducing alcohol and other drug use and other risk behaviors. Early research on alternative programs has revealed several key features that can increase a program's effectiveness:

- Focusing on building skills rather than merely occupying time
- Providing intensive services over a substantial period of time
- Targeting youth at highest risk, including those who are already using alcohol or other drugs
- Involving youth as peer leaders and planners
- Promoting positive youth development and resiliency
- Offering culturally specific programs to attract and retain participants

The programs and strategies described below each utilize some or all of these key features.

TYPES OF ALTERNATIVE PROGRAMS

Mentoring Programs

A close, supportive relationship with a caring adult can be a strong protective factor for young people. Research shows that such relationships help youths perform better in school, form healthy relationships with their peers, develop high self-esteem, and avoid involvement in risky behaviors, such as alcohol and drug use, violence, and unprotected sex.[10]

When young people lack consistent, supportive relationships with parents, guardians, or other relatives, they may benefit from *mentoring*. Mentoring generally refers to the establishment of a sustained relationship between a youth and an adult. Through continued involvement, the adult offers support, guidance, and assistance as the younger person goes through a difficult period or faces new challenges. Mentoring can happen naturally, when caring adults, such as teachers, coaches, or faith-community members, take an active interest in a young person and develop an ongoing relationship built on trust. Mentoring can also be planned, through such organized programs as Big Brothers Big Sisters or Across Ages.

Mentoring Illustration: Big Brothers Big Sisters of America

Big Brothers Big Sisters of America (BBBSA) is a community mentoring program that matches an adult volunteer, known as a Big Brother or Big Sister, to a child, known as a Little Brother or Little Sister, with the expectation that a caring and supportive relationship will develop.[11] The mentoring program targets youth ages 6 to 18 from single-parent homes in communities across the United States. Selected as one of the 10 Model Programs in the *Blueprints for Violence Prevention* series, BBBSA is known for effecting positive, lasting changes in the lives of young people who live with single parents.

A professional staff member selects, matches, and monitors the relationship with the volunteer and child, and communicates with the volunteer, parent/guardian, and child throughout the matched relationship. The volunteers receive rigorous screening and background checks to verify their suitability for and commitment to forming a caring bond with a young person.

The volunteer typically spends three to five hours a week with the child over the course of a year or longer. At the beginning, a case manager meets with the parent/guardian, child, and Big Brother or Big Sister to set goals for the mentoring relationship in such areas as school attendance, academic performance, relationships with other children and siblings, learning new skills, or developing a hobby. An individual case plan is developed and updated over time as the relationship develops and the child's needs evolve. The case manager maintains regular contact with the volunteer, the parent/guardian, and the child, to oversee how well the relationship is developing, provides guidance as needed, and encourages and supports various activities.

The most important aspects of the relationship are consistency and commitment. The activities between the mentor and the child depend on their individual wishes and interests.

While research on other mentoring programs has failed to demonstrate their effectiveness, research on the BBBS model provides evidence that a caring relationship between an adult volunteer and a young person can provide a wide range of tangible benefits, including better school performance, better relationships with peers and adults, greater self-esteem, and reduced likelihood of using alcohol and other drugs.

How Can Mentoring Be Used in My Community?

Communities wishing to start mentoring programs should plan and implement them by following national exemplary models. Evaluations of successful programs reveal that a structured, staffed mentoring program is critical for establishing the kind of match between mentor and mentee that is needed to create an effective relationship and make a real difference in a child's life.[12] Well-intentioned but ad hoc programs that do not provide adequate structure may have mixed results. Established programs, such as BBBSA and Across Ages (see pages 6 & 16), have learned important lessons about recruiting mentors and helping them create effective relationships:

- Recruitment of volunteers can be difficult; for example, in the BBBSA program, as many as half the youth seeking a mentor have been unable to be matched up with one. Recruitment of minority volunteers has been more successful in agencies with diverse staffs and boards of directors. Word of mouth can be the most effective recruitment strategy.

- Screening of potential volunteers should include police background checks, personal references, and information on employment status. The strenuous screening process should be emphasized in the application materials.

- Matching should take into account the preferences of the youth as well as of the parent and volunteer.

- A case manager's supervision of the mentoring relationship is critical. Mentoring sites that follow standard procedures for supervision typically have the most successful, sustained matches between mentor and youth.[13]

- Mentoring programs ideally provide thorough training for new mentors, as well as ongoing support to mentors for as long as they remain involved.

By following the guidelines identified by existing programs and the National Mentoring Partnership (see the Resources section for more information), program developers can help to ensure that a quality program will be implemented.

How Do I Know This Works?

Studies of the BBBSA program, the largest and most extensive mentoring program in the country, found that a structured, supportive program with well-matched volunteers and youth could be successfully implemented in community settings and could have a viable impact on youth substance use, school attendance, and relationships with parents and peers.[14] A comparative, controlled study of nearly 1,000 10- to 16-year olds from eight BBBS agencies over an 18-month period revealed promising results.[15] Compared to a randomly assigned control group of children placed on a waiting list for mentors, youths who participated in BBBS were:

- 46 percent less likely than control youth to initiate drug use during the study period
- 27 percent less likely to initiate alcohol use than control youth
- nearly one-third less likely than control youth to hit someone
- more likely to have high-quality relationships with their parents or guardians than control youth
- more likely to have high-quality relationships with their peers at the end of the study period than did control youth

An evaluation of another proven model, the Across Ages intergenerational mentoring program (see page 16), found that mentoring programs can increase school attendance; enhance positive attitudes toward others, the future, and school; and reduce substance abuse.[16] Students with deeply committed mentors changed their attitudes toward older people, school, and the future and developed an increased capacity to resist peer pressure to use drugs.

Community Service and Service-Learning

From assisting the homebound elderly to cleaning up public parks to tutoring younger children, youth often find community service enriching and engaging. Meaningful service challenges young volunteers to use their interpersonal, creative, and/or physical skills to make substantive contributions to their communities. Besides providing an opportunity for constructive endeavors, service opportunities can also be pleasurable and even fun for children and adolescents. Because community service engages young people in pro-social behavior and consumes free time, it can offer a healthy alternative to substance use and abuse. Community service also fosters the bonding of young people to their community, thus creating channels of communication and increasing young people's acceptance of healthy community norms.[17]

Service-learning is a special type of experiential education that combines meaningful service to the community with classroom instruction. Service-learning programs involve students in selecting the site and tasks for their service; provide structured opportunities for them to complete the service, usually over a period of days or weeks; and offer opportunities for students to reflect on their experiences through discussion, writing,

journaling, drawing, or other expressive activities. While much of what has been documented about service-learning has been school-based, many after-school programs have also incorporated community service into their structured activities.[18]

To fully engage young people and ensure that community service is more than a way to occupy time (or, in some cases, a penalty for misbehavior), a service program would ideally ensure the following:

- The young volunteers help select the service site and plan the tasks for the project.
- The project gives the volunteers a sense that their work was needed and that they have made a meaningful contribution.
- The project enables young people to use their strengths and skills productively, so they can develop a stronger sense of self-efficacy.
- The project is fun or stimulating—in short enjoyable and worth doing again.
- Time for reflection is built into the project.

Community Service: An Illustration
Teen Outreach Program

The Teen Outreach Program (TOP) is a community service-learning program that combines community service with an educational curriculum. It can be offered in schools or in structured out-of-school settings.[19] The goals of the program are as follows:

- Promoting young people's healthy behavior for successful achievement in school and attainment of their lifelong goals
- Helping young people acquire valuable life skills to grow into healthy, self-sustaining adults
- Giving young people a sense of purpose through authentic opportunities to contribute in meaningful ways to their communities

TOP's Service-Learning Component helps young people prepare for and participate in volunteer community service. Youth share their volunteer experiences through discussion, research activities, writings, and/or creative presentations. As part of this sharing, young people receive consistent messages about the values that underlie the program, including such concepts as adult responsibility for supporting young people through difficult times, respect for diversity and intolerance for prejudice and discrimination, responsibility for our own actions and their consequences, and an obligation to promote our own well-being and that of our community.

Service-learning projects range from serving as aids in hospitals to participating in a walkathon to tutoring peers. Each TOP site conducts a community mapping exercise with program youth to identify possible sites for group or individual service projects as a first step. Youth then decide as a group or individuals the type of volunteer service they want to do.

The Classroom-Based Component consists primarily of small-group activities and discussion on topics of special interest to young people, using the *Changing Scenes* curriculum. Offered at four levels for young people ages 12 to 17, the curriculum focuses on building knowledge and skills related to self-esteem, values, relationships, sexuality, decision-making, communication and other topics that address the goals of the program. Each level contains 30–40 lessons, 30–50

minutes in length. While TOP has generally been implemented in a school setting, it has also been adapted to out-of-school settings.

Evaluation of the program has shown marked reductions in school drop-out rates, school suspensions, and pregnancy rates.[20]

How Can This Be Used in My Community?

Community service programs benefit not only the young volunteers, but also a sector of the community, be it housebound seniors, persons with disabilities, younger children, or public places in need of repair or cleanup. With proper guidance, young people can be committed volunteers with a great deal of energy to contribute.

Before embarking on any community service program, prevention planners must develop effective partnerships with community organizations and ensure that the organization will benefit from youth service and can identify tasks that young people can do. No community-based organization will relish being surprised by a well-intentioned group of youth volunteers.

Prevention planners interested in using community service as a prevention strategy might try the following:

- **Incorporate community service into school-based educational curricula**. Many community service-learning programs are school-based. Educators have increasingly been drawn to service-learning as part of the school curriculum because they believe it is helpful in building personal and social development, reducing risk behavior, increasing self-esteem and self-efficacy, building interpersonal and intercultural skills, and instilling a sense of civic responsibility in young people. A recent survey found that 64 percent of all public schools and 83 percent of all public high schools organize some form of community service for their students, and nearly one-third of all schools provide service-learning programs that link community service with classroom instruction.[21]

- **Incorporate community service into health instruction.** REACH for Health, a longitudinal study of urban minority youths receiving school-based health education, found that when health instruction was coupled with youth community service activities, the participants had better health outcomes, particularly for sexual behaviors and violence, than young people receiving only the health curriculum.[22]

- **Integrate community service into the activities of a mentoring program.** Mentors and mentees can do community service activities together as an effective means of teaching civic responsibility and the sense of fulfillment that comes from using one's skills to help others. (See page 6)

- **Use available national resources to develop community-service programs founded in research and practitioner experience.** Contact the National Service-Learning Clearinghouse at 800-808-SERVE or www.servicelearning.org for more information.

How Do I Know This Works?

Thus far, the impact of youth community service on preventing substance use *per se* has not been studied. However, there is some evidence that community service programs may reduce other risk behaviors that often correlate or coincide with youth drinking, smoking, and drug use. Research studies and program evaluations have identified the following positive results:

- Community service can increase positive attitudes toward others, the future, and the community.[23]
- Elementary and middle school service–learning programs have resulted in reduced levels of alienation and behavioral problems.[24]
- Service-learning students are less likely to be referred to the office for disciplinary measures.[25]
- High school and middle school students in service-learning programs are less likely to engage in behaviors that lead to pregnancy and arrest.[26]
- Middle school students engaged in school programs that combine community service with classroom health instruction were less likely to report being either perpetrators or victims of violence.[27]
- Urban adolescents at risk for HIV, sexually transmitted diseases, and unintended pregnancy who participated in a well-organized community service program coupled with classroom health instruction were significantly less likely to engage in sexual activity or have unprotected sex than a control group.[28]
- TOP, a service-learning initiative, has been shown, through evaluation, to have a positive impact on young people's behavior.[29] In a 10-year evaluation of the program, TOP students demonstrated a 60 percent lower school drop-out rate, a 33 percent lower pregnancy rate, and an 18 percent lower rate of school suspension, when compared with a comparison sample.

As part of a comprehensive substance abuse prevention program, community service may be a valuable alternative activity with positive behavioral outcomes that are consistent with a substance-free lifestyle.

Skill-Building Programs

Among the most promising of prevention programs are those that teach youth important life skills, such as the ability to interact well with others, resist peer pressure, make responsible decisions, delay gratification, and think critically about media messages about alcohol, tobacco, and other drugs. Research on resiliency consistently shows that youth who have a positive self-image and a sense of accomplishment and autonomy are better able to resist drugs and alcohol than children with low self-esteem and poor social skills.[30] Many classroom drug prevention curricula focus on building these skills.

Offering skill-building programs in *alternative* settings, such as after-school programs, Boys and Girls Clubs, Scout groups, and so forth, can reinforce the skills taught in the classroom. Skills-oriented alternatives may also have greater potential for reaching special populations of youth who have problems in school, have already used drugs, or are more receptive to learning such skills in a more informal, less-threatening, out-of-school setting. Alternative programs can give young people the opportunity to practice their new skills in real-life interactions with their peers, outside of the limits of classroom schedules and curriculum restraints.[31]

Skill-Building Programs: An Illustration
SMART Moves

SMART Moves (Skills Mastery and Resistance Training) is a prevention program offered by the Boys and Girls Clubs of America that targets drug and alcohol use and early sexual activity. The program teaches young people ages 6–15 how to say no to substances by involving them in discussion and role-playing, practicing resistance and refusal skills, developing assertiveness, strengthening decision-making skills, and analyzing media and peer influences. The ultimate goal is to promote abstinence from substance abuse and adolescent sexual involvement through the practice of responsible behavior.[32]

Boys and Girls Clubs offer the SMART Moves program as part of recreational and cultural activities that focus on promoting a sense of belonging and bonding with peers in the community. While educational in nature, the out-of-school setting enables the program to be delivered in an informal environment while still delivering important educational messages and learning activities.

SMART Moves has three programs for different age groups. Smart Kids, for ages 6 to 9, helps youth identify and resist peer and media pressures toward high-risk behaviors by focusing on self-awareness, decision-making, and drug awareness. Start Smart, for ages 10 to 12, teaches children about alcohol and drugs and trains them in resistance skills. Stay Smart, for youth ages 13 to 15, teaches decision-making and goal setting.

How Can This Be Used in My Community?

Skill-building activities are already incorporated into a wide variety of youth-oriented programs.

Skill building is integral to such youth development initiatives as 4-H, Girl/Boy Scouts, Camp Fire Boys and Girls, and Boys and Girls Clubs, whose missions revolve around developing young people's self-esteem, helping them learn, and empowering them to become self-reliant, healthy individuals. Boys and Girls Clubs, in particular, offer effective drug prevention programs, such as SMART Moves, to high-risk youth (see the illustration above) and have been shown to change young people's attitudes toward alcohol, tobacco, and other drugs.

After-school programs represent another potential youth enrichment opportunity. These programs are a growing trend, particularly in urban areas, and provide structured settings for young people who would otherwise lack adult supervision. For example, in New York City and New York State, The After-School Corporation funds community-based organizations to operate after-school programs in public schools from 3 to 6 p.m. Monday through Friday. The programs, led by staff coordinators and after-school teachers, provide educational enrichment through activities in language arts, science, mathematics, fine and performing arts, and sports. The programs also stress health and social development and cover such topics as nutrition and substance abuse prevention.

Planners wishing to include skill-building programs in their substance abuse prevention strategies should look to existing community youth development programs, particularly those that are well-established, are institutionalized within their settings, and have substantial support from the community. Prevention planners may consider providing grants to these programs to incorporate education and skill building around alcohol, tobacco, and other drugs. Boys and Girls

Clubs, Scout groups, after-school programs, and youth groups in faith communities, all represent potential partners in the effort to provide young people with positive experiences that enrich their skills and deter them from drugs and alcohol.

How Do I Know This Works?

As with other alternatives, it is difficult to isolate the effects these skill-building programs might have on reducing substance use and other risk behaviors. Alternatives tend to be most effective when they are intensive, consistent, and targeted to youth at highest risk, yet implementing such programs in settings where participation is voluntary is a particular challenge for prevention planners. Still, as part of a comprehensive strategy for alcohol and other drug prevention, skill-building programs can offer incredible benefits to young people and help enhance their health and resiliency. Several studies have also found the following results regarding the influence of these programs on risk behavior in youth:

- A study of public housing developments with and without Boys and Girls Clubs found that those with clubs had an overall reduction in alcohol and other drug use, drug trafficking, and drug-related crime.[33]
- A longitudinal study of SMART Moves found that the program, both with and without a two-year booster program, reduced drug-related behavior and increased knowledge concerning drug use among 13 year olds. Programs with booster programs had additional positive effects on youths' attitudes toward alcohol and marijuana use.[34]
- Research from many sources shows a promising link between after-school programs and improvement in grades, test scores and graduation rates. Other desirable outcomes for youth who participate in after-school programs are improved social skills resulting in better peer relations, healthier interaction with teachers and other adults and greater self-esteem.[35]

Recreational Activities

Concerned adults often call for structured activities to keep young people busy and out of trouble. Often, the result is a recreational program, such as midnight basketball, after-school arts activities, or sober parties and dances, with a heavy emphasis on using entertainment to "keep kids off drugs." While such efforts may indeed keep an individual youth busy and involved in a positive, supervised activity, their effects on substance use are difficult to establish, especially if they are one-time events or ad hoc efforts unaccompanied by a structured intervention targeting high-risk youth or focusing on building life skills.

Recreational Alternatives: An Illustration

Athletes Training and Learning to Avoid Steroids (ATLAS)[36]

The ATLAS project is a school-based substance abuse prevention program featuring influential coaches and peer leaders in a team setting to reduce risk factors for anabolic steroid (AAS) use.

The goals of the program are to reduce students' risks by changing their attitudes toward using AAS, increasing their knowledge of alternatives to AAS use and their perception that they can take advantage of these alternatives, and increasing their satisfaction with their body image. The U.S. Department of Education has rated this program as Exemplary, and CSAP has rated this program as Model.

The program, offered by coaches and peer leaders, is incorporated into athletic training activities. Athletic teams meet for 10 45-minute classroom sessions during the season, usually as part of the team's scheduled practice. Three additional 45-minute sessions occur in the weight room and focus on safe, effective strength training. These sessions are coach-directed and peer-facilitated, in groups of six to eight teammates. The coach and peer leaders use scripted lesson plans.

Program activities are highly interactive and create an atmosphere of camaraderie and positive peer influences. The classroom sessions involve role-playing, student-created campaigns, and educational games. Students learn the facts about AAS, alcohol, and other drugs and their dangers and effects on student health and athletic performance. They learn skills to resist drug offers and are taught to use nutrition and strength training as safer alternatives to AAS use. The program also debunks media images that promote substance abuse and emphasizes coach and team intolerance of drug use.

Parents receive written information about the program and are invited to a discussion session. The program contains four booster sessions for each subsequent year of high school.

Participants completed a questionnaire before and immediately after the intervention (approximately 10 weeks apart) and at 9- or 12-month follow-up. The questionnaire assessed AAS use risk factors, knowledge and attitudes concerning AAS, sports nutrition and exercise knowledge and behaviors, and intentions to use AAS. After a year, students in the ATLAS program, compared with the control group, showed the following:

- Less use of illicit drugs (marijuana, amphetamines, and narcotics)
- Less drinking-and-driving occurrences
- Improved drug use refusal skills
- Less use of supplements
- Reduced intentions to use AAS
- A greater belief in their personal vulnerability to the adverse consequences of AAS
- Less belief in AAS-promoting media messages
- An increased belief in the team as an information source
- Improved perception of their athletic abilities and strength-training self-efficacy
- Improved nutrition and exercise behaviors
- Improved self-esteem

How Can This Be Used in My Community?

Because the research base on recreational alternatives is minimal (see below), communities should evaluate the best use of their limited resources when deciding to implement such programs as prevention measures. Still, recreational programs may offer several advantages to community prevention efforts:

- **They may identify young people at risk for alcohol, tobacco, or other drug use.** Because recreational activities may feel less threatening than structured programs, they may have a powerful attraction for young people who actively resist authority or who are disengaged from their families or school. Hosting enjoyable activities, such as sports, dances, and leisure programs, in places where teens gather may help identify young people who could benefit from structured prevention efforts.

- **Supervised recreational activities can provide unique opportunities for relationships between young people and caring adults.** Coaches, after-school teachers and youth group leaders may be excellent mentors and role models for young people.

- **They help make a community statement against youth substance use and abuse.** In a sense, recreational programs that promote a no-use norm can effectively be considered communication campaigns, since they raise public awareness and draw media attention to substance abuse issues. They can also serve as ideal launching vehicles for educational campaigns.

Do recreational alternatives work?

There is minimal research documenting the impact of recreational alternatives on youth substance use. Many recreational programs are ad hoc, one-time events whose effects cannot be readily measured. Despite the limited research base, though, such programs are very popular. Midnight basketball and "sober proms" have a strong common-sense appeal and can give the community a sense that it is taking action to steer youths away from alcohol and other drugs. It is critical, however, that communities not rely on ad-hoc leisure events in place of proven strategies, such as environmental change, education, and family-based prevention. Until there is science to support the use of such activities, limited community resources might be better spent on comprehensive programs that target high-risk youth.

That is not to say that sports and other leisure activities are not integral to youth development overall, as they certainly are an important part of any child's life. Even if a reduction in alcohol or drug use cannot be documented, recreational programs should be among the program offerings of any caring community. Prevention practitioners are merely urged to keep in mind that such programs are unlikely to show measurable effects—though they might increase their impact if they are infused with one or more of the elements of effective alternative programs, such as mentoring, tutoring, or skill-building activities.[37]

CONCLUSION

Alternatives can be an integral part of programs to prevent young people from using alcohol, tobacco, and other drugs. By filling their time with enriching and engaging activities, alternatives enable young people to interact healthfully with their peers and with caring adults, learn about themselves, and improve their social, intellectual, emotional, and physical skills. Although the evidence does not support the use of alternatives as a sole prevention strategy, particularly given limited prevention dollars, alternatives can and should be part of a comprehensive plan to make young people's lives richer and healthier.

The Across Ages program, considered a model alternative program by many evaluators, serves as a composite example of a healthy alternative that can make a genuine difference in young people's behavior and development. The program combines mentoring, community service, and skill building and has been shown to be effective in increasing resiliency and resistance to alcohol and other drugs.

Across Ages: An Intergenerational Program for Middle School Students

Across Ages is a school- and community-based intergenerational program in Philadelphia that brings young students together with both older adults and their own parents, siblings, and other family members. Targeting sixth graders at high risk, it seeks to increase resiliency and reduce the likelihood that students will drop out of school, become adolescent parents, or use alcohol, tobacco, or other drugs.

The core feature of the program is the **mentoring component:** recruiting and training older adults (age 55 and up), and matching them as mentors with sixth grade students. Empirical evidence demonstrates that mentoring has a positive effect on young lives. Mentors can help youth overcome personal and social barriers, expose them to new relationships and opportunities, and assist in the development of problem-solving and decision-making skills. Across Ages provides intensive in-service training for mentors, and monitors the mentoring relationships during the course of the school year.

Classroom teachers, or other appropriate staff, are trained to implement the **skill-building component** with students once a week for 26 weeks. The Social Problem Solving and Substance Abuse Prevention modules of the *Positive Youth Development* curriculum address such topics as stress management, peer resistance skills, and substance abuse and health information.

The **community service component** arranges for students to visit with residents in nursing homes, in keeping with the program philosophy about understanding issues that affect people across the life span. Students become providers of service to their elder partners in the nursing home, as well as the recipients of service from their mentors.

The **family component,** which involves parents, siblings, and other family members of the students in regular weekend activities, is a way of helping families support the mentor-youth relationships and also get them involved in positive activities with their children.

Evaluations over three years show that youth in the full program were absent fewer days of the year and demonstrated greater improvements in their attitudes toward school, the future, and adults; their knowledge of older people; their sense of well-being; their reactions to situations involving drug use; and their performance of community service.[38]

Prevention practitioners looking to enhance young people's lives with positive after-school experiences may wish to examine the programs and strategies described in this guide. Again, practitioners are urged to remember that while alternatives can be an important component of an effort to reduce youth alcohol and other drug use, the most effective approach is one that uses multiple strategies targeting the individuals at highest risk.

RESOURCES

General

National Center for the Advancement of Prevention (1996). **A Review of Alternative Activities and Alternative Programs in Youth-Oriented Prevention: CSAP Technical Report 13.** DHHS Publication No. (SMA) 96-3117. Washington, DC: Department of Health and Human Services.

This CSAP report reviews the research literature documenting the efficacy of specific alternative strategies.

Beyond Prevention Curricula: A Guide to Developing Alternative Activities Programs
This guide is designed to help educators and youth workers better understand how alternative activities can be used to supplement school-based alcohol and drug prevention efforts. It explains the rationale behind alternatives, offers strategies for program implementation, and presents promising programs. Produced by the U.S. Department of Education, the guide is available on line at www.drugs.indiana.edu/publications/beyond/

Community Service and Service-Learning

Learning in Deed: Making a Difference through Service-Learning. This four-year, $13 million national initiative aims to broaden the use service-learning in school districts across America. The purpose of the initiative is to improve communities and teach youth the value of civic participation. Working with teachers, administrators, community members, parents, students, policymakers, and national leaders, the Kellogg Foundation aims to make service-learning a common teaching practice across America. For more information, visit www.learningindeed.org

National Service-Learning Clearinghouse
(800) 808-SERVE
www.servicelearning.org

Mentoring

National Mentoring Center
Northwest Regional Educational Laboratory
101 S.W. Main Street, Suite 500
Portland, OR 97204
Phone: (800) 547-6339, ext.135, or (503) 275-0135
E-mail: mentorcenter@nwrel.org
www.nwrel.org/mentoring/index.html

The National Mentoring Partnership
1600 Duke Street, Suite 300
Alexandria, VA 22314
Phone: (703) 224-2200
Fax: (703) 226-2581
www.mentoring.org

Skill-Building

The YouthLearn Guide: A Creative Approach to Working with Youth and Technology.
The Morino Institute (2001). Newton, MA: Education Development Center, Inc.

The *YouthLearn Guide* is a 160-page manual that can serve as a resource for planning and implementing creative, active learning centers for youth, using technology and the Internet. It offers practical advice on starting a center or program, establishing the program's vision, and sustaining the quality of the program over the long term. It also provides teaching and learning materials, including age-appropriate projects and classroom ideas. The guide is available at the cost of $19.95 for YouthLearn subscribers, $24.95 for schools and nonprofit organizations, and $29.95 for others. More information on the guide, including sample pages, is available at www.youthlearn.org/guide/

The Collaborative for Academic, Social, and Emotional Learning

In 1994, the Collaborative for Academic, Social, and Emotional Learning (CASEL) was founded to establish social and emotional learning as an essential part of education from preschool through high school. CASEL includes and collaborates with an international network of leading researchers and practitioners in the fields of social and emotional learning, prevention, positive youth development, character education, and school reform. CASEL's mission is to establish social and emotional learning as an integral part of education, from preschool through high school. For more information is available at www.casel.org

After-School Programs: An Analysis of Need, Current Research, and Public Opinion.
New York: The After-School Corporation (1999)
This paper summarizes the literature on the need for, and benefits of, after-school programs.

Multiple Choices After School: Findings from the Extended-Service Schools Initiative.
Philadelphia: Public/Private Ventures. (2002)
This report summarizes the findings of a study of 20 communities around the United States that adapted four nationally recognized models of after-school programming.

Programs Described in This Guide

Across Ages
Temple University
Center for Intergenerational Learning
1601 North Broad Street
USB 206
Philadelphia, PA 19122
Phone: (215) 204-6708 (main number), (215) 204-6970 (main switchboard)
Fax: (215) 204-6733
E-mail: andreat46@aol.com , Mikesonk@astro.ocis.temple.edu
www.temple.edu/CIL/Acrossageshome.htm

Big Brothers Big Sisters of America (National Office)
230 North 13th Street

Philadelphia, PA 19107
Phone: (215) 567-7000
Fax: (215) 567-0394
E-mail: national@bbbsa.org
www.bbbsa.org

SMART Moves
Boys and Girls Clubs of America
1230 West Peachtree Street, N.W.
Atlanta, GA 30309
Phone: (404) 487-5766
www.bgca.org/programs/healthlife.asp

Teen Outreach Program (TOP)
Cornerstone Consulting Group, Inc.
One Greenway Plaza, Suite 550
Houston, Texas 77046-0103
Phone: (713) 627-2322
Fax: (713) 627-3006 fax
E-mail: lalvim@cornerstone.to
www.cornerstone.to/top/teen%20outreach.html

TOP materials can be purchased from The Cornerstone Consulting Group, P.O. Box 710082, Houston, TX 77281-0082, (215) 572-9463. A seven-piece set that includes handouts, a facilitator's guide, and service learning supplement for Levels 1–4 is available for $195; an operations manual on how to put a program together is available for $35; and a community service handbook is available for $15.

CSAP's Northeast CAPT	CSAP
Policy	Environmental Approaches
Enforcement	Environmental Approaches
Collaboration	Community-Based Processes
Communications	Information Dissemination
Education	Prevention Education
Early Intervention	Problem Identification and Referral
Alternatives	Alternatives

ENDNOTES

[1]Gardner, S. E., & Brounstein, P. J. (2001). *Series Guide to Science-Based Practices. Principles of Substance Abuse Prevention*. Rockville, MD: U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration, Center for Substance Abuse Prevention, Division of Knowledge Development and Evaluation. www.northeastcapt.org/csap/papers/gardner-cover2.asp.

[2] The After-School Corporation (1999). *After-School Programs: An Analysis of Need, Current Research, and Public Opinion.* New York: The After-School Corporation.

[3] U.S. Department of Education & U.S. Department of Justice (1998). *Safe and Smart: Making the After-School Hours Work for Children.* Washington, DC: U.S. Department of Education.

[4] Mulhall, P. F., Stone, B. & Stone, D. (1996.) Home alone: Is it a risk factor for middle school youth and drug use? *Journal of Drug Education,* 26 (1).

[5] Mulhall, P. F., Stone, B. & Stone, D. (1996.) Home alone: Is it a risk factor for middle school youth and drug use?

[6] Zill, N., Winquist Nord, C., & Loomis, L. S. (1995). *Adolescent Time Use, Risky Behavior and Outcomes: An Analysis of National Data—Report for the Office of the Assistant Secretary for Planning and Evaluation, U.S. Department of Health and Human Services.* Retrieved January 10, 2002, from aspe.os.dhhs.gov/hsp/cyp/xstimuse.htm

[7] McGill, D. E., Mihalic, S. F., & Grotpeter, J. K. (1998). *Blueprints for Violence Prevention, Book Two: Big Brothers Big Sisters of America*. Boulder, CO: Center for the Study and Prevention of Violence.; Tierney, J. P., Grossman, J. B., with Resch, N. L. (1995). *Making a Difference: An Impact Study of Big Brothers Big Sisters*. Philadelphia: Public/Private Ventures.; Schinke, S., Orlandi, M., & Cole, K. (1992). Boys and Girls Clubs in public housing developments: Prevention services for youth at risk. *Journal of Community Psychology*, OSAP Special Issue, 118–28. National Center for the Advancement of Prevention (1996). *A Review of Alternative Activities and Alternative Programs in Youth-Oriented Prevention: CSAP Technical Report 13.* DHHS Publication No. (SMA) 96-3117. Washington, DC: Department of Health and Human Services.

[8] National Center for the Advancement of Prevention (1996). *A Review of Alternative Activities and Alternative Programs in Youth-Oriented Prevention: CSAP Technical Report 13.*

[9] National Center for the Advancement of Prevention (1996). *A Review of Alternative Activities and Alternative Programs in Youth-Oriented Prevention: CSAP Technical Report 13.;* Rohrbach, L. A., Johnson, C. A., Mansergh, G., Fishkin, S. A., & Neumann, F. B. (1997). Alcohol-related outcomes of the day one community partnership. *Evaluation and Program Planning,* 20(3), 315–322.

[10] Hawkins, J. D., Catalano, R. F., & Miller, J. Y. (1992). Risk and protective factors for alcohol and other drug problems in adolescence and early adulthood: Implications for substance abuse prevention. *Psychological Bulletin*, Jul; 112(1): 64-105.

[11] McGill, D. E., Mihalic, S. F., & Grotpeter, J. K. (1998). *Blueprints for Violence Prevention, Book Two: Big Brothers Big Sisters of America*.

[12] Furano, K., Roaf, P. A., Styles, M. B., and Branch, A. Y. (1993*). Big Brothers Big Sisters: A Study of Program Practices*. Philadelphia: Public/Private Ventures.

[13] McGill, D. E., Mihalic, S. F., & Grotpeter, J. K. (1998). *Blueprints for Violence Prevention, Book Two: Big Brothers Big Sisters of America*.

[14] Tierney, J. P., Grossman, J. B., with Resch, N. L. (1995). *Making a Difference: An Impact Study of Big Brothers Big Sisters*.

[15] Tierney, J. P., Grossman, J. B., with Resch, N. L. (1995). *Making a Difference: An Impact Study of Big Brothers Big Sisters*.

[16] Brounstein, P. J. & Zweig, J. M. (1996). *Understanding Substance Abuse Prevention—Towards the 21st Century: A Primer on Effective Programs.* Rockville, MD: Center for Substance Abuse Prevention, Substance Abuse and Mental Health Services Administration, U.S. Department of Health and Human Services; LoSciuto, L., Rajala, A. K., Townsend, T. N., & Taylor, A. S. (1996). An outcome evaluation of Across Ages: An intergenerational mentoring approach to drug prevention. *Journal of Adolescent Research,* 11(1), 116–129; as cited in Gardner, S. E., and Brounstein, P. J. (2001). Principles of Substance Abuse Prevention. Rockville, MD: U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration, Center for Substance Abuse Prevention, Division of Knowledge Development and Evaluation.

[17] LoSciuto, L., Rajala, A. K., Townsend, T. N., & Taylor, A. S. (1996). An outcome evaluation of Across Ages: An intergenerational mentoring approach to drug prevention.; Brounstein, P. J. and Zweig, J. M. (1996). *Understanding Substance Abuse Prevention—Toward the 21st Century: A Primer on Effective Programs*.; as cited in: Gardner, S. E. and Brounstein, P. J. (2001). *Principles of Substance Abuse Prevention*.

[18] *Resource Center for Adolescent Pregnancy Prevention (2001). ReCAPP: Theories and Approaches—Service Learning*. Retrieved January 9, 2002, from www.etr.org/recapp/theories/servicelearning.htm.

[19] *Resource Center for Adolescent Pregnancy Prevention (2001). ReCAPP: Theories and Approaches—Service Learning*.
[20] Allen, J. P., Philliber, S., Herrling, S., & Kuperminc, G.P. (1997). Preventing teen pregnancy and academic failure: Experimental evaluation of a developmentally-based approach. *Child Development*, *64,*(4), 729–742.
[21] National Center for Education Statistics (1999). NEED TO FIND THIS CITATION – NOT IN BIBLIOGRAPHY. As cited in: Billig, S. H. (2000). The Impacts of Service-Learning on Youth, Schools and Communities: Research on K–12 School-Based Service-Learning, 1990–1999. Retrieved on January 7, 2002, from www.learningindeed.org/research/slresearch/slrsrchsy.html.
[22] O'Donnell, L., Stueve, A., San Doval, A., Duran, R., Atnafou, R., Haber, D., Johnson, N., Murray, H., Grant, U., Juhn, G., Tang, J., Bass, J., & Piessens, P. (1999). Violence prevention and young adolescents' participation in community youth service. *Journal of Adolescent Health,* 24(1), 28–37; O'Donnell, L., Stueve, A., San Doval, A., Duran, R., Haber, D., Atnafou, R., Johnson, N., Grant, U., Murray, H., Juhn, G., Tang, J., & Piessens, P. (1999). The effectiveness of the Reach for Health Community Youth Service learning program in reducing early and unprotected sex among urban middle school students. *American Journal of Public Health,* 89(2), 176–81.
[23] LoSciuto, L., Rajala, A. K., Townsend, T. N., & Taylor, A. S. (1996). An outcome evaluation of Across Ages: An intergenerational mentoring approach to drug prevention. *Journal of Adolescent Research,* 11(1), 116–29; Brounstein, P. J. & Zweig, J. M. (1996). *Understanding Substance Abuse Prevention—Towards the 21st Century: A Primer on Effective Programs*; as cited in: Gardner, S. E., and Brounstein, P. J. (2001). *Principles of Substance Abuse Prevention.*
[24] Stephens, L. (1995). *The Complete Guide to Learning through Community Service*, Grades K–9. Boston, MA: Allyn and Bacon; as cited in: Billig, S. H. (2000). The Impacts of Service-Learning on Youth, Schools and Communities: Research on K–12 School-Based Service-Learning, 1990–1999.
[25] Follman, J. (1998). *Florida Learn and Serve: 1996–1997 Outcomes and Correlations with 1994–95 and 1995–96*. Tallahassee, FL: Florida State University, Center for Civic Education and Service; as cited in: Billig, S. H. (2000). The Impacts of Service-Learning on Youth, Schools and Communities: Research on K–12 School-Based Service-Learning, 1990–1999.
[26] Melchior, A. (1999). *Summary Report: National Evaluation of Learn and Serve America*. Waltham, MA: Center for Human Resources, Brandeis University; as cited in: Billig, S. H. (2000). The Impacts of Service-Learning on Youth, Schools and Communities: Research on K–12 School-Based Service-Learning, 1990–1999.
[27] O'Donnell, L., Stueve, A., San Doval, A., Duran, R., Atnafou, R., Haber, D., Johnson, N., Murray, H., Grant, U., Juhn, G., Tang, J., Bass, J., & Piessens, P. (1999). Violence prevention and young adolescents' participation in community youth service.
[28] O'Donnell, L., Stueve, A., San Doval, A., Duran, R., Haber, D., Atnafou, R., Johnson, N., Grant, U., Murray, H., Juhn, G., Tang, J., & Piessens, P. (1999). The effectiveness of the Reach for Health Community Youth Service learning program in reducing early and unprotected sex among urban middle school students.
[29] Allen, J. P., Philliber, S., Herrling, S., & Kuperminc, G.P. (1997). Preventing teen pregnancy and academic failure: Experimental evaluation of a developmentally-based approach.
[30] Block, J., Block, J., & Keyes, S. (1988). Longitudinally foretelling drug usage in adolescence: Early childhood personality and environmental precursors. *Child Development, 59*(2), 336–355; Jessor, R. (1976). Predicting time of onset of marijuana use: A development study of high school youth. *Journal of Consulting Psychology,* 44(1), 125–134; Kellam, S. G., Brown, C. H., and Flemming, J. P. (1982). The prevention of teenage substance use: Longitudinal research and strategy. In T. J. Coates, A. C. Peterson, & C. Perry, (Eds.), *Promoting Adolescent Health: A Dialog on Research and Practice*. (pp. 171–200). New York: Academic Press; Shedler, J. & Block, J. (1990). Adolescent drug use and psychological health: A longitudinal inquiry. *American Psychologist*, *45*(5), 612–630; as cited in National Center for the Advancement of Prevention (1996). *A Review of Alternative Activities and Alternative Programs in Youth-Oriented Prevention: CSAP Technical Report 13*.
[31] U.S. Department of Education. *Beyond Prevention Curricula: A Guide to Developing Alternative Activities Programs*. Retrieved on November 16, 2001 at www.drugs.indiana.edu/publications/beyond
[32] Boys & Girls Clubs of America. *SMART Moves (Skills Mastery and Resistance Training)*. Retrieved on December 15, 2002 at www.bgca.org/programs/healthlife.asp
[33] Schinke, S., Orlandi, M., & Cole, K. (1992). Boys and Girls Clubs in public housing developments: Prevention services for youth at risk.
[34] St Pierre, T. L.; Kaltreider, D. L.; Mark, M. M., & Aikin, K. J. (1992). Drug prevention in a community setting: A longitudinal study of the relative effectiveness of a three-year primary prevention program in Boys and Girls Clubs across the nation. *American Journal of Community Psychology, 20*(6), 673–706.
[35] The After-School Corporation (1999). *After-School Programs: An Analysis of Need, Current Research, and Public Opinion.* New York: The After-School Corporation.

[36] Goldberg, L., Elliot, D., Clarke, G., MacKinnon, D. P., Zoref, L., Moe, E., Green, C., and Wolf, S. L. (1996). The adolescents training and learning to avoid steroids (ATLAS) prevention program: Background and results of a model intervention. *Archives of Pediatric and Adolescent Medicine*, 150: 713–721

[37] National Center for the Advancement of Prevention (1996). *A Review of Alternative Activities and Alternative Programs in Youth-Oriented Prevention: CSAP Technical Report 13*.